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Paths to QUALITY: A Child Care Quality Rating & Improvement System for Indiana. Evaluation Methods and Measures

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A Child Care Quality Rating & Improvement System for Indiana:

Technical Report no. 2 Evaluation Methods and Measures

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Paths to QUALITY Evaluation Project Overview

The Child Care Bureau of the Indiana Family and Social Services Administration implemented a statewide voluntary child care quality rating and improvement system (QRIS) named "Paths to QUALITY" beginning in January, 2008. Paths to QUALITY (PTQ) is a quality rating and improvement system for state-regulated Indiana early care settings, including family child care homes, licensed child care centers, and unlicensed, registered child care ministries. Licensed or registered child care providers voluntarily participate. The goal of Paths to QUALITY is to improve child care quality and support better developmental outcomes for young children by giving parents information about what constitutes quality care. Paths to QUALITY also provides resources for child care providers to help them improve the quality of their service. (See Figure 1 for an overview "logic model" illustrating how PTQ is designed to work.)

The Purdue University evaluation research will determine whether the PTQ quality ratings are valid and also examine children's learning and development within the PTQ system. PTQ establishes four levels of quality that apply to licensed centers, licensed family child care homes, and registered child care ministries. Each level includes specific criteria that must be met in order for that level to be awarded. The quality levels are labeled:

Level 1 – Health and Safety

Level 2 – Learning Environment

Level 3 – Planned Curriculum

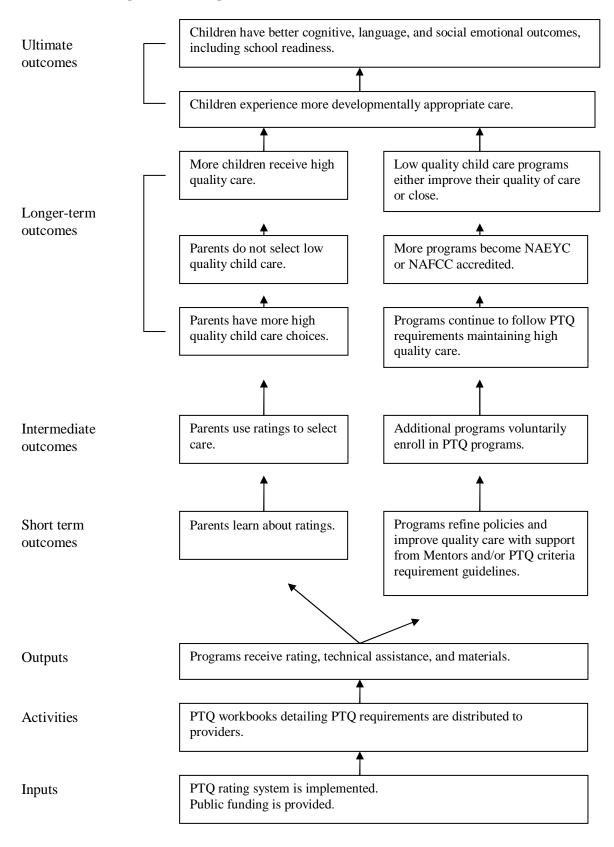
Level 4 – National Accreditation

The Consulting Consortium, under a separate contract with the state, observes child care programs, interviews child care program owners and/or directors, and reviews administrative documents to determine the PTQ quality level of each facility. Licensed child care centers, family child care homes, and registered child care ministries have different but complementary standards to meet in order to advance from level to level. Providers who participate in this system are visited on a minimum of once per year to determine if their ratings have changed. (See overview of quality levels and the specific standards for each level on the Paths to QUALITY web site, www.in.gov/fssa/carefinder/2747.htm).

The overall goal of the Purdue University Paths to QUALITY Evaluation is to determine if the program is *effective* in its initial implementation phases, by focusing on the following questions:

- Does PTQ actually increase the quality of licensed child care centers, registered child care ministries, and licensed family child care homes that participate?
- Are children in higher level PTQ homes or centers learning more or developing more optimally?

Figure 1. A Logic Model for Indiana Paths to QUALITY



PTQ Evaluation Questions & Research Design

The Purdue Evaluation team has a four year contract with the Bureau of Child Care within the Families and Social Services Administration of the State of Indiana and is responsible for evaluating the PTQ program's effectiveness and impact on child care in the state. The overall goal of the Paths to QUALITY (PTQ) Evaluation is to determine if the child care quality rating and improvement system program is *effective*:

- Does PTQ actually increase the quality of licensed child care centers, registered child care ministries, and licensed family child care homes that participate?
- Are children in higher level PTQ homes or centers learning more or developing more optimally?

In the first phase of the project, completed in 2007, the Purdue evaluation team answered the following general question: "Is there scientific evidence that the Indiana PTQ standards are valid indicators of child care quality that support children's development?"

A validation study of the proposed system was completed, examining available research evidence that proposed Indiana PTQ levels criteria are clearly related to child care quality and positive child development outcomes. Published research articles, technical reports from QRS evaluations in other states, and results from two Indiana PTQ pilot programs were reviewed and analyzed. This preliminary PTQ validation study answered three specific questions:

- 1. Will the proposed Indiana PTQ levels and criteria result in increasing the quality of child care children receive? (What does existing research tell us?)
- 2. Will the Indiana PTQ system improve developmental outcomes for children? (What does existing research tell us?)
- 3. What are the known results and effects of the two Indiana PTQ pilot programs? (Fort Wayne and Evansville areas)

A technical report summarizing this review and providing answers to these questions was delivered to the Indiana Child Care Bureau in October, 2007. The title of the report is "Paths to QUALITY—A Child Care Quality Rating System for Indiana: What is its Scientific Basis?" This report is available on the Paths to QUALITY web site, www.in.gov/fssa/carefinder/2747.htm. To request a printed copy of the report, contact the Purdue Center for Families, (765) 494-9878 or (www.cfs.purdue.edu/CFF/).

Second, a number of evaluation measures were selected or developed. During the summer of 2007, lead staff members of the evaluation team received training on the revised University of North Carolina child care quality rating scales (ECERS-R, ITERS-R, and FCCERS-R) so they were prepared to train, supervise, and maintain reliability for the PTQ regional evaluation data collectors. Additional measures and survey instruments were selected or created by the evaluation team during 2007. All evaluation instruments were field tested, with preliminary data collected to assure that selected measures were appropriate and worked reliably, before data collection began.

Third, an evaluation advisory committee of key Indiana stakeholders was convened. The evaluation research plan has been reviewed and refined with input from this committee.

In the second phase of the evaluation the Purdue Evaluation team will begin to evaluate the PTQ program's effectiveness and impact on child care, nine months to one year following the initial PTQ roll out in each state region. Evaluation data collected in each region will be comprised of information

reported to the PTQ central data system as a part of the enrollment and assessment process, live observations by Purdue research assistants to assess quality in a randomly-selected sample of child care settings, assessments by Purdue research assistants of randomly-selected individual children's development in those settings, surveys with child care providers, and telephone surveys with parents served by PTQ providers. A second phase of data collection will begin in each region 17 months after the initial funding date (6 months after the first data collection phase ends.) This phase will include random telephone surveys with parents in the general public in each region, conducted by the Purdue Social Research Institute, and follow-up telephone surveys with the original sample of child care providers, conducted by Purdue Evaluation staff. The following specific questions will be addressed in this evaluation research:

- 1. Are child care providers of all types entering the voluntary PTQ system? Do providers understand the system? What are the incentives for providers to enroll? What are the barriers?
- 2. How many and what types of providers enroll in PTQ during the first year? How did providers find out about PTQ?
- 3. Is PTQ reaching providers of all types (licensed family child care homes, licensed child care centers, and non-licensed, registered child care ministries)? In all geographic areas? Urban vs. rural?
- 4. Are some types of providers slower or more reluctant to participate in PTQ? Why?
- 5. How long does it take for providers to enroll in the system and to receive their initial PTQ rating?
- 6. Do child care providers move to higher PTQ levels after enrolling in the system? How long does this take?
- 7. Over the first year of PTQ, how many providers increase, maintain, or decrease PTQ levels? What are the characteristics of providers who increase levels, compared to those who maintain or decrease levels?
- 8. Are providers aware of available training/technical assistance (T/TA) resources to help them increase PTQ levels, and do they use them? Does T/TA help providers advance to higher PTQ levels?
- 9. When providers attain higher PTQ levels, does this result in higher quality care and education for children?
- 10. Are children who are placed with providers with higher PTQ levels developing more optimally than children placed with providers having lower PTQ levels?
- 11. Are parents of Indiana infants, toddlers, and preschool children aware of and do they understand the PTQ system? How does the PTQ system affect parents' child care decisions?

Evaluation Data Collection Procedures

PTQ Recruitment

Local child care resource and referral agencies in each state region recruit child care providers
using existing communication and marketing channels, such as presentations at community
meetings and brochures at community events.

PTO Enrollment

- Providers attend a Paths to QUALITY Introduction session conducted by the Child Care
 Resource and Referral Agency for the county where the child care business is located. Providers
 receive information about participation in Paths to QUALITY at the session and the enrollment
 forms that provide basic information about who they are, how to contact them, and details about
 their child care operation.
- Providers are verified to be in good standing based on compliance with licensing regulations (licensed centers and family child care homes) or voluntary certification (registered ministries).
- Providers sign a "Memorandum of Agreement" with the State agreeing to comply with the
 voluntary requirements of the PTQ program and to participate in the Purdue University
 evaluation study if requested.
- All providers enter Paths to QUALITY with a Level 1 status. The provider is given a Level 1 certificate, a decal to place on their door, a workbook, toolkit, and a small non-cash participation incentive.
- Providers may request and then will be assigned a Mentor/Advisor to assist them through the PTQ process and to provide technical assistance for level advancement.
- After the provider meets all criteria for a level increase, they contact their mentor, Paths to QUALITY Specialist, or Quality advisor to request a level increase rating visit.
- A Readiness Checklist is completed by the mentor/specialist/advisor with the provider to verify readiness for the rater visit.
- The PTQ specialist/coordinator makes a request for a rating increase visit.
- A staff person from The Consultants Consortium (independent contractor with state government) visits the facility and rates them on a PTQ level between 1 and 4. The Level rating is shared with the child care facility and a rating recommendation is made to the Bureau of Child Care.
- Once approved by the Bureau of Child Care, the provider receives a new certificate, toolkit, and decal to place on their door indicating their current Paths to QUALITY level. In addition, the provider may receive a non-cash or cash award from the State.
- Whether a new level increase rating visit is requested or not, a follow-up annual maintenance visit will occur within 12 months of the initial rating visit to ascertain whether the PTQ level has changed or been maintained.
- For the annual maintenance rating visit, the provider has 90 days to make any adjustments they need to maintain their current rating.
- Providers can progress at their own pace, however they must wait six months after a level increase rating visit to request another level increase rating.
- Data from rating visits, incentives and awards are recorded in a central database operated by the State, and any follow-up activity is tracked.

Evaluation Sample Selection

• A total of 520 child care environment quality assessments, 1,040 child assessments, and 1,040 parent interviews will be completed statewide over a 3 year period.

- A stratified random sample is selected for each region using the PTQ central database. In 10 of the 11 regions 9 licensed child care centers, 3 registered child care ministries, and 20 family child care providers are selected.
- In the remaining region (Marion County/Indianapolis), 20 licensed child care centers, 10 registered ministries, and 20 family child care home providers are selected. Additional providers are sampled in the Marion County Indianapolis region because 22% of Indiana's population and 25% of Indiana's young children (ages 0 4 years) reside there (Kids Count, 2007).
- Equal numbers of providers are selected at each PTQ Level if possible. (For example, at least 4 homes at each level; at least 2 centers at each level.)
- If there are insufficient numbers of any type of child care provider enrolled in the PTQ system in a particular region, additional providers of the other types will be sampled in that region.
- Selected child care facilities are mailed an invitation packet consisting of invitation letters and consent forms for directors/family child care home owners.
- Five days after packet is mailed to directors and family child care home owners, they are phoned to verify that they are willing to participate in the evaluation (see Appendix A, Consent Forms).
- If provider agrees to participate in the evaluation, the research assistant will ask the owner/director to complete and sign the consent form and hold it until the Purdue data collector arrives to conduct the quality and child assessments.
- The research assistant collects information about the classrooms (i.e., ages of children and number of classrooms) and randomly selects two classrooms in each center or ministry to be observed. An infant toddler classroom and a preschool age classroom will be selected in each center when possible.
- A second evaluation packet will be mailed to directors and family child care owners which will
 include: invitation to teachers to participate, teacher consent forms, invitation to parents to
 participate, parent/child consent forms, teacher survey, director survey, and an informational
 flyer for teachers and family child care home owners to post in their classrooms/homes for
 parents (see Appendix A, Consent Forms).
- The provider receives this second packet and distributes and collects parent consent forms.
- Data collector schedules a convenient time to conduct quality rating observations of the selected classrooms or family child care home environment and to assess 2 children in each classroom or family child care home.
- Upon arriving for the quality assessment visit, the data collector randomly selects two children (and their parents) from each classroom or family home to complete the child assessment and parent interview.

Data Collection

Training of Data Collectors

 In 2007, core key staff members of the evaluation team received intensive training on the revised University of North Carolina child care environmental quality rating scales (ECERS-R, ITERS-R, and FCCERS-R) at the Frank Porter Graham Child Development Center. This reliability training enabled them to train, supervise, and maintain reliability of the Indiana PTQ regional evaluation data collectors.

- In 2007-2008, measures and survey instruments were selected or created, and then field tested, with preliminary data collected to assure that the selected measures would work reliably when data collection began.
- Three months prior to data collection in each region, data collectors are hired in strategic locations throughout the state.
- Data collectors are trained on administration, reliability, and validity of the assessment measures, accurate scoring procedures, basic interpretations of terms used throughout the measures, and observation, assessment, and interview procedures required for each measure.

First Phase Data Collection

- Nine months to one year after each state region is funded for PTQ, the first phase of data collection begins, allowing time for each region to start up the program, enroll providers of all types, and assess each provider for initial placement in a PTQ quality level in sufficient numbers to make evaluation feasible.
- Four months are required to collect the phase 1 evaluation data in the regions in Wave 1 and 3, and 7 months in the regions in Waves 2 and 4. Table 1 provides an overview of the planned evaluation data collection schedule.
- Child care quality observations, provider surveys, child assessments, and parent interviews are completed for each classroom or family home.
- Preliminary results from each region will be issued to the Child Care Bureau two months following each data collection period.

Second Phase Data Collection

- Six months after the first phase of data collection for each region concludes, the Purdue Social Research Institute will randomly select and survey 60 parents of preschool children from the general public in each region to assess general awareness, understanding, and use of the PTQ system.
- Six months after the first phase of data collection for each region concludes, the Purdue Evaluation staff will conduct follow-up telephone surveys with the original sample of child care providers.

Table 1: Indiana Paths to QUALITY Child Care Regions—Evaluation Schedule

QRS Funding Begins	Phase 1 Evaluation Begins	Phase 1 Phase 1 Evaluation Complete	Phase 1 Regional Phase 2- Report Due Parent 6 Provider	Phase 2. Random Parent Survey & Provider Follow-up	Phase 2 Regional Report Due	Sample Sizes
						64 providers (88 quality observations)
1/1/08 9/1/08		12/15/08	2/15/08	1/1/09- 2/28/09	6/1/09	9 centers 20 homes 3 ministries (44 observations) 88 children-parents 60 general public
1/1/08 9/1/08		12/15/08	2/15/08	1/1/09- 2/28/09	6/1/09	9 centers 20 homes 3 ministries (44 observations) 88 children-parents 60 general public
						128 providers (176 quality observations)
5/1/08 2/1/09		8/31/09	10/31/09	12/1/09- 2/28/10	5/1/10	9 centers 20 homes 3 ministries (44 observations) 88 children-parents 60 general public
5/1/08 2/1/09		8/31/09	10/31/09	12/1/09- 2/28/10	5/1/10	9 centers 20 homes 3 ministries (44 observations) 88 children-parents 60 general public
5/1/08 2/1/09		8/31/09	10/31/09	12/1/09- 2/28/10	5/1/10	9 centers 20 homes 3 ministries (44 observations) 88 children-parents 60 general public

PTQ Evaluation Methods

9 centers 20 homes 3 ministries (44 observations) 88 children-parents 60 general public	50 Providers (80 quality observations)	20 centers 20 homes 10 ministries (80 observations) 160 children-parents 60 general public	128 providers (176 quality observations)	9 centers 20 homes 3 ministries (44 observations) 88 children-parents 60 general public	9 centers 20 homes 3 ministries (44 observations) 88 children-parents 60 general public	9 centers 20 homes 3 ministries (44 observations) 88 children-parents 60 general public	9 centers 20 homes 3 ministries (44 observations) 88 children-parents 60 general public
5/1/10		7/1/10		12/1/10	12/1/10	12/1/10	12/1/10
12/1/09- 2/28/10		2/1/10- 4/30/10		8/1/10- 9/30/10	8/1/10- 9/30/10	8/1/10- 9/30/10	8/1/10- 9/30/10
10/31/09		1/15/10		6/30/10	6/30/10	6/30/10	6/30/10
8/31/09		10/31/09		4/30/10	4/30/10	4/30/10	4/30/10
2/1/09		5/1/09		10/1/09	10/1/09	10/1/09	10/1/09
5/1/08		10/1/08		1/1/09	1/1/09	1/1/09	1/1/09
Community Alliances & Services for Children (Clay, Greene, Montgomery, Morgan, Owen, Parke, Putnam Sullivan, Vermillion, Vigo) SDA 6	Wave 3	Wave 3 Childcare Answers (Marion, Hendricks, Hamilton, Johnson) SDA7	Wave 4	Hufer Memorial Childrens' Center (Delaware, Fayette, Hancock, Henry, Madison, Randolph, Rush, Shelby, Union, Wayne) SDA 8	Comexions (Benton, Boone, Carroll, Cass, Clinton, Fountain, Jasper, Newton, Pulaski, Tippecanoe, Warren, White)	Workforce Development Services (Lake, La Porte, Porter) SDA1	Community Coordinated of St. Joseph (Elkhart, Fulton, Kosciusko, Marshall, Starke, St. Joseph) SDA 2

Implementation of the PTQ System

• The Indiana PTQ central database is utilized to gather basic information about the child care facilities that have volunteered to participate, such as:

- o the type of child care offered (center-based, home-based, registered ministry),
- o contact information for the director,
- o numbers and ages of children served, and
- o geographic area servedPTQ level history
- o how providers found out about PTQ,
- o rate of time between provider enrollment and PTQ quality rating, and
- o demographic characteristics of providers more successful and less successful in program.

Child Care Quality and Child Development Outcomes

- Data collectors observe each classroom or home for a period of 3 to 4 hours for the quality assessments using the appropriate measure (ECERS-R, ITERS-R or FCCERS-R).
- Child/teacher ratio and group size in each classroom or family child care home will be recorded.
- Data collectors rate provider sensitivity using the Caregiver Interaction Scale (CIS; Arnett, 1989).
- Children's developmental progress is assessed via direct observation and testing, plus child care provider surveys are completed.

Provider and Parent Perceptions of Paths to QUALITY

Initial Provider Survey and Classroom Teacher/Lead Caregiver Survey

- Child care directors/owners selected for the child care quality observations complete a self administered survey to ascertain if providers understand the PTQ system, what prompted providers to enroll in the system, what obstacles, if any, they faced in participating in the system, what training/technical assistance resources they have used, and how their child care practices may have changed as a result of being on the PTQ system.
- Data collectors obtain the survey when they complete the quality rating observation and child assessments.
- Each classroom teacher and family child care home lead caregiver completes a short survey about their current level of education and training. Purdue research assistants collect this teacher/provider survey during the child care quality observation.

Follow up Provider Telephone Survey

- Child care directors/owners selected for the child care quality observations are interviewed by phone 6 months following the child care assessment visits to ascertain their understanding of the PTQ system, what obstacles they faced in participating in the system, what training/technical assistance resources were available to them and used, and how their child care practices may have changed as a result of being on the PTQ system.
- Telephone interviews last approximately 30 minutes and will be conducted by the research assistants based on the Purdue campus.

PTQ Parent Telephone Survey

 Parents of children selected for the child development assessments in each child care facility, are interviewed by phone to assess their understanding and use of the PTQ system within one week

of the completed child care quality assessment. Telephone interviews last approximately 15 minutes and are conducted by the Purdue research assistants.

General Public Parent Telephone Survey

- Using a purchased list of phone numbers for households in each region that include preschool age children, the Purdue Social Research Institute (SRI) will randomly select and survey 60 parents of preschool children from the general public in each of the 11 state regions (total = 660 interviews) to assess general public awareness, understanding, and use of the PTQ system.
- Informed consent is obtained on the phone.
- Telephone interviews last approximately 20 minutes and are conducted by SRI-trained research assistants.

PTO Measures

Table 2 (pages 19-20) provides a summary of all research measures used in the Paths to QUALITY evaluation.

Characteristics of Child Care Providers, Children, and Parents

Education and training information of child care directors and family child care home owners is collected at time of program enrollment with the local child care resource and referral agency and entered in the statewide PTQ online database. Demographic information is collected in the director/family child care home owner survey. Classroom teachers and lead caregivers in family child care homes are also asked about their training and education. See Appendix C for the survey questions. When parents complete the consent form, they will also provide some initial information about their child. The parent contact information form is displayed in Appendix D.

Child Care Quality Measures

Classrooms caring for children ages 2 ½ and older in licensed child care centers and registered child care ministries are assessed using the Early Childhood Environment Rating Scale-Revised (ECERS-R), while classrooms caring for infants and toddlers (birth to 30 months) in licensed child care centers and registered child care ministries are assessed using the Infant Toddler Environment Rating Scale-Revised (ITERS-R). The Family Child Care Environment Rating Scale-Revised (FCCERS-R) will be used to assess quality in family child care homes. The three measures, designed to carry similar conceptual structures, allow researchers to compare quality across types of child care settings. Assessors will be trained on the three measures and then complete independent observations with reliable trainers to a 85% (within one point) reliability before beginning data collection. Inter-rater reliability will be monitored throughout the entire data collection period to maintain reliability among assessors. Reliability checks will be completed with each assessor throughout data collection.

Early Childhood Environment Rating Scale—Revised edition (ECERS-R: Harms, Clifford, & Cryer, 1998). The ECERS-R will be used to assess child care quality in center-based child care classrooms caring for children ages $2\frac{1}{2}$ and up. It consists of 43 items organized under seven subscales: space and furnishings, personal care routines, language-reasoning, activities, interaction, program structure, and parents and staff. Each item is rated on a 7-point scale (1 = inadequate; 3 = minimal; 5 = good; 7 = excellent). The total scale was shown to be reliable (r = .92; Harms, Clifford, & Cryer, 1998).

Infant Toddler Environment Rating Scale—Revised edition (ITERS-R: Harms, Clifford, & Cryer, 2003). The ITERS-R will be used to assess child care quality in center-based child care classrooms caring for children ages 0 to 30 months. It consists of 39 items organized under seven subscales: space and furnishings, personal care routines, listening and talking, activities, interaction, program structure,

and parents and staff. Each item is rated on a 7-point scale (1 = inadequate; 3 = minimal; 5 = good; 7 = excellent). The total scale was shown to be reliable (r = .92; Harms, Clifford, & Cryer, 2003).

Family Child Care Environment Rating Scale—Revised edition (FCCERS, Harms, Clifford, & Cryer, 2007). The FCCERS-R will be used to assess child care quality in family child care home settings. It consists of 38 items organized under seven subscales: space and furnishings, personal care routines, listening and talking, activities, interaction, program structure and parents and provider. Each item is rated on a 7-point scale (1 = inadequate; 3 = minimal; 5 = good; 7 = excellent). The total scale was shown to be reliable (r = .88; Harms, Clifford, & Cryer, 2007).

Caregiver Interaction Scale (CIS; Arnett 1989). The Caregiver Interaction Scale assesses the quality and content of the teacher's interactions with children. The 26 items measure the emotional tone, discipline style, and responsiveness of the provider in the classroom or family home. Trained assessors will rate dimensions of provider interactions using a 4-point scale [Not at all (1) to Very much (4)] during the child care setting environmental rating scale observation. The CIS consists of 4 subscales: Positive interactions (10 items), Punitiveness (eight items), Detachment (four items), and Permissiveness (four items). Cronbach alphas ranging from .91 to .98 have been reported (Layzer, Goodson, & Moss, 1993; Resnick & Zill, 1999.)

Child Development Outcome Measures

Cognitive Development--Infants Toddlers (0-36 months)

Mullen Scales of Early Learning (Mullen, 1995). The Vision Reception Scale of the Mullen Scales of Early Learning will be used to assess infants/toddlers cognitive development. The Visual Reception Scale examines a child's performance in processing visual patterns. Internal consistency has been tested using modified split-half procedure for each scale and for the composite. The median values of the internal consistency for each scale have been reported ranging from .75 to .83 and that of the composite was .91. In addition, test-retest reliability has been checked by administering the scales to two samples (50 1- to 24-month-old children and 47 25- to 56-month-old children). Test-retest reliabilities for the younger group were from .82 to .85; those for the older group were from .71 to .79. In addition, the author of the measure has examined correlations between Mullen Scales and other measures, such as Bayley Scales of Infant Development (Bayley, 1993) which have been found to be predictive of school readiness measures (Berry, Bridges, & Zaslow, 2004). Higher correlations were found between Mullen Scales and Bayley Mental Development Index (ranging from .53 to .59) than between Mullen Scales is a valid measure of cognitive development.

Cognitive Development-Preschool age children (3-5 years)

Woodcock Johnson III Applied Problems and Letter Word Identification Subtests. The two subtests will be used to assess cognitive development in preschool age children. The Letter-Word Identification subtests include items measuring symbolic learning, or the ability to match a pictographic representation of a word with an actual picture of the object, and items measuring children's reading identification skills in identifying letters and words. The Applied Problems subtest measures children's skill in analyzing and solving practical problems in mathematics. The Woodcock Johnson subtests measure aspects of cognitive functioning that have been associated with school readiness and has been widely used in evaluation research (Berry et al, 2004).

Language Development-Infants Toddlers (0-36 months)

Mullen Scales of Early Learning (Mullen, 1995). The Receptive Language and Expressive Language Scales of the Mullen Scales of Early Learning will be used to assess infants/toddlers language development. The Receptive Language Scale examines a child's ability to process linguistic input. The Expressive Language Scale examines a child's ability to use language productively. Internal consistency is reported above.

Language Development-Preschool age children (3-5 years)

Peabody Picture Vocabulary Test – 4 (PPVT-4: Dunn & Dunn, 1997). Peabody Picture Vocabulary Test – III (PPVT-III) will be used to measure receptive (hearing) vocabulary (designed to measure a children's vocabulary acquisition). Trained assessors will ask children to point to the picture that matches the words spoken by the assessor. The scores were converted to standard scores. Reliability has been tested using modified split-half procedure, and the median reliability was .94 (ranging from .86 to .97). Alternate forms reliability coefficients have also calculated by administering two different test forms to the same group of children. The coefficients computed from the standard scores ranged from .88 to .96 (median = .94). Validity was also investigated using other measures of vocabulary and verbal ability (WISC-III; KAIT; K-BIT; and OWLS). Moderate to high correlations were found, with coefficients ranging from .62 to .91, supporting that PPVT-III is a valid instrument that measures some aspects of children's intelligence, verbal ability quite well. The PPVT has been found to be related to other measures of cognitive development that predict school readiness (Berry et al, 2004).

Social Emotional Development-Infants Toddlers (0-36 months)

Brief Infant Toddler Social and Emotional Assessment (BITSEA: Briggs-Gowan & Carter, 2002). The BITSEA will be used to measure infants' and toddlers' social emotional competence and behavioral problems. Child care providers will respond to BITSEA items based on behaviors observed at home or in child care. This is a short version of ITSEA (Infant Toddler Social and Emotional Assessment). Three scales are derived from the BITSEA – Problem, Competence, and a combined Problem and/or Competence scale. The BITSEA consists of 60 items selected from ITSEA, and each item is scaled 0: Not true/Rarely, 1: Somewhat true/Sometimes, and 2: Very true/Often. This measure contains two subscales, one of which measures problem behaviors (49 items) and the other measures competence (11 items). Internal consistency of the scales from the original data was .66 to .89 (Briggs-Gowan, Carter, Skuban, & Horwitz, 2001). Validity has been measured by comparing parents' report with evaluators' ratings, and most correlations have been significant (r = .39 to .44). As an additional measure of validity, authors have investigated whether or not "parental worry, parenting stress, and interference in family life (p. 26)" are significantly related to high scores on problem scale and low scores on competence scales to measure another kind of validity, and they found significant relationships among them (r = .25 to .63). Scores on the BITSEA have also been found to be related to other measures of social emotional development (Berry et al, 2004). The internal consistencies have been reported as .74 for competence scale and .84 for the problem scale.

Social Emotional Development-Preschool age children (3-5 years)

Social Competence and Behavior Evaluation (SCBE: LaFreniere & Dumas, 1996). The short form of SCBE consists of three scales: Anger-Aggression (10 items), Social Competence (10 items), and Anxiety- Withdrawal (10 items). These scales will be used to assess socio-emotional competence. Providers rate items ranging from not at all like the child (1) to very much like the child (2). The original 80-item Social Competence and Behavior Evaluation (SCBE) was developed to measure 30- to 78-month-old children's "patterns of social competence, emotion regulation and expression, and adjustment difficulties (p.369)." Anger-Aggression scale contains items regarding angry, aggressive, egotistical, and oppositional behaviors; Social Competence scale consists of items related to joyful, secure, tolerant,

socially integrated, calm, pro-social, cooperative, and autonomous behaviors; and Anxiety-Withdrawal scale includes items related to depressed, anxious, isolated, and dependent behaviors. Sixty-seven percent of the total variance was explained by these three factors. The authors collected data in three different sites: Quebec, Indiana, and Maine. Internal consistencies ranged from .72 to .89. Validity was tested by computing correlations of these three indexes with the corresponding 10-item scales, and the correlations ranged from .92 to .97. In addition, in the Indiana sample the authors asked teachers to rate children using another measure related to children's problem behaviors (the Revised Behavior Problem Checklist: RBPC) and computed correlations with Anger-Aggression and Anxiety-Withdrawal scales. The Pearson's correlations were .67 and .87 indicating that scores on the SCBE are predictive of other measures of social emotional development.

Child Care Provider Surveys

Initial Provider Survey

Child care directors/owners selected for the child care quality observations complete a survey to determine if providers understand the PTQ system, what prompted providers to enroll in the system, what obstacles they face in participating in the system, what training/technical assistance resources they have used, and how their child care practices may have changed as a result of being on the PTQ system. See Appendix E for survey questions.

Follow up Provider Telephone Survey

The same sample of child care providers selected for the initial provider survey will be contacted 6 months following the child care assessment visits described above. They will be asked similar questions about their understanding of the PTQ system, what obstacles they believe they face in participating in the system, what training/technical assistance resources they have used, and how their child care practices may have changed as a result of being on the PTQ system. Telephone interviews will last approximately 30 minutes and will be conducted by the research assistants based on the Purdue campus. See Appendix F for survey questions.

Parent Surveys

PTQ Parent Telephone Survey

For the children selected for the child development assessments in each child care facility, the Purdue Evaluation Staff will also interview a parent from each child's household by phone to assess their understanding and use of the QRS system. Telephone interviews will last approximately 15 minutes and will be conducted by the research assistants. See Appendix G for survey questions.

General Public Parent Telephone Survey

The Purdue Social Research Institute (SRI) will use the following survey to ask 60 parents of preschool children from the general public in each of the 11 state regions (total = 660 interviews) about their general awareness, understanding, and use of the QRS system. See Appendix H for survey questions.

Table 2. Overview of Measures

	Data collected from Chi	d Care Provider		
Variable	Name of Measure	Measure Description		
Child Care Quality-	Early Childhood	Assessors use scale to rate overall child		
Global Assessment	Environmental Rating	care quality in center-based child care		
	Scale—Revised (ECERS-	classrooms caring for children ages 2 ½		
	R)	and up.		
	Infant Toddler	Assessors use scale to rate overall child		
	Environmental Rating	care quality in center-based child care		
	Scale—Revised (ITERS-R)	classrooms caring for children ages 0 to 30 months.		
	Family Child Care	Assessors use scale to rate child care		
	Environmental Rating Scale (FCCERS-R)	quality in family child care home settings.		
Child Care Quality-	Caregiver Interaction Scale	Assessors rate the quality and content of		
Provider Sensitivity	(CIS)	the teacher's interactions with children.		
Providers'	Surveys of providers	Includes questions about providers'		
perceptions of PTQ	participating in PTQ	understanding of PTQ, perceptions of PTQ		
		assessment, technical assistance received,		
		and impact of PTQ on providers'		
		businesses		
Providers'	Follow-up surveys with the	Survey follows up on perceptions of PTQ		
perceptions of PTQ	original sample of providers	assessment, technical assistance received,		
		and impact of PTQ on providers'		
		businesses		
	Data collected from	the Parent		
Variable	Name of Measure	Measure Description		
Parents' perceptions	Surveys with parents served	Includes questions about parents'		
of PTQ PTQ	by PTQ providers	understanding of PTQ and whether PTQ		
participants		has affected their child care choices.		
Parents' perceptions	Surveys with randomly-	Includes questions about parents'		
of PTQ General	selected parents in the	understanding of PTQ and whether PTQ		
public	general public	has affected their child care choices.		

Data collected from/about the Child				
Variable	Name of Measure	Measure Description		
Cognitive Development— infant and toddlers	Mullen Scales of Early Learning	Direct assessment of child's ability to process visual patterns.		
Cognitive Development preschool age	Woodcock Johnson Applied Problems subtest	Direct assessment of children's skill in solving practical problems in mathematics.		
children	Woodcock Johnson Letter Word Identification subtest	Direct assessment of early reading skill such as or the ability to match a pictographic representation of a word with an actual picture of the object and identifying letters and words.		
Language Development— infant toddler	Mullen Scales of Early Learning	Direct assessment of receptive (vocabulary acquisition) and expressive (ability to use language productively) language.		
Language Development— preschool age children	Peabody Picture Vocabulary Test	Direct assessment of receptive (vocabulary acquisition) language.		
Social Emotional Development— infant toddler	Brief Infant Toddler Social and Emotional Assessment	Provider rates child's problem behavior and social competence.		
Social Emotional Development— preschool age children	Social Competence and Behavior Evaluation	Provider rates child's aggression, anxiety, and social competence.		

To learn more about the Indiana Paths to QUALITY program:

PTQ web site: www.in.gov/fssa/carefinder/2554.htm
Melanie Brizzi, Indiana Child Care Administrator
Melanie.Brizzi@fssa.IN.gov
Bureau of Child Care
Family and Social Services Administration

For more information about the Purdue evaluation of PTQ, contact:

Jim Elicker, Ph.D.
Director, PTQ Evaluation
Associate Professor & Director of Early Childhood Programs
Child Development & Family Studies
Purdue University
Fowler Memorial House
1200 W. State St.
West Lafayette, IN 47907-2055
elickerj@purdue.edu
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Fax- 765-494-0503

PTQ Evaluation Methods References

Arnett, J. (1989). Caregivers in day-care centers: Does training matter? *Journal of Applied Developmental Psychology*, 10, 541-552.

Bangs, T. E. (1986). Birth to Three Development Scale. Allen, TX: DLM Teaching Resources.

Bayley, N. (1993). *Bayley Scales of Infant Development, Second Edition*. San Antonio: Harcourt Brace & Co.

Berry, D. J., Bridges, L. J., & Zaslow, M. J. (2004). *Early Childhood Measures Profile*. http://aspe.hhs.gov/hsp/ECMeasures04/report.pdf.

Brigance, A. H. (1978). *BRIGANCE Diagnostic Inventory of Early Development*. North Billerica, MA: Curriculum Associates.

Briggs-Gowan, M. J., & Carter, A. S. (2002). *Brief Infant-Toddler Social and Emotional Assessment (BITSEA) manual, version 2.0.* New Haven, CT: Yale University.

Briggs-Gowan, M. J., Carter, A. S., Skuban, E., Horwitz, S. (2001). Prevalence of social-emotional and behavioral problems in a community sample of 1- and 2-year-old children. *Journal of the American Academy of Child & Adolescent Psychiatry*, 40(7), 811-819.

Dunn, L. M., & Dunn, L. M. (1997). *Peabody Picture Vocabulary Test, Third edition*. Circle Pines, MN: American Guidance Service.

Harms, T., Cryer, D., & Clifford, R. (1998). *Early Childhood Environment Rating Scale – Revised Edition*. New York: Teachers College Press.

Harms, T., Cryer, D., & Clifford, R. (2003). *Infant Toddler Environment Rating Scale – Revised Edition*. New York: Teachers College Press.

Harms, T. Cryer, D. & Clifford, R. (2007). Family Child Care Environment Rating Scale—Revised Edition. New York: Teachers College Press.

Howes, C., & Stewart, P. (1987). Child's play with adults, toys, and peers: An examination of family and child care influences. *Developmental Psychology*, 23(3), 423-430.

LaFreniere, P.J. & Dumas, J.E. (1997). Social competence and behavior evaluation in children ages 3 to 6 years: The short form (SCBE-30). Psychological Assessment, 8(4), 369-377.

Layzer, J. I., Goodson, B. D., & Moss, M. (1993). *Observational Study of Early Childhood Programs, Final Report, Volume I: Life in Preschool.* Cambridge, MA: Abt Associates, Inc.

Mullen, E. M. (1995). *Mullen Scales of Early Learning*. Circle Pines, MN: American Guidance Service, Inc.

Osborne, S. S., Schulte, A. C., & McKinney, J. D. (1991). A longitudinal study of students with learning disabilities in mainstream and resource programs. *Exceptionality*, 2, 81-96.

Resnick, G., & Zill, N. (1999). *Is Head Start Providing High-Quality Education Services?* "*Unpacking*" *Classroom Processes*. Albuquerque, NM: Biennial Meeting of the Society for Research in Child Development, April 15-18.

Schaefer, E. S., Edgerton, M., & Aaronson, M. (1977). *Classroom Behavior Inventory*. Chapel Hill, NC: The Frank Porter Graham Child Development Center.

Zill, N., Resnick, G., Kim, K., McKey, R. H., Clark, C., Pai-Samant, S., Connell, D., Vaden-Kiernan, M., O'Brien, R., & D'Elio, M. A. (2001). *Head Start FACES: Longitudinal Findings on Program Performance. Third Progress Report.* Mclean, VA: Abt Associates, Inc.

APPENDIX A Consent Forms

RESEARCH PARTICIPANT CONSENT FORM (Director or Family Child Care Home Owner)

Evaluation of Indiana Child Care Quality Rating System
Dr. Jim Elicker, Principal Investigator
Purdue University
Child Development and Family Studies

Purpose of Research

The purpose of this research is to evaluate the effectiveness of the statewide voluntary child care quality rating system, Paths to QUALITY (PTQ), implemented by the Child Care Bureau of the Indiana Family and Social Services Administration.

Specific Procedures to be Used

Researchers will randomly select a director or a family child care home owner from the list of providers enrolled in the PTQ system. We will contact you if you are selected. Once you agree to participate a member of the Purdue research team will schedule a visit(s) to your center or family child care home. Two center classrooms or your child care family will be selected and observed for about 4 hours by a Purdue research assistant for a confidential quality assessment. During the child care quality observation, two children in each classroom or family child care home whose parents have returned consent forms will receive a child development assessment administered by the trained Purdue research assistant. These data will be released to and kept confidential by the Purdue University Evaluation Research Team. This child development assessment will be done in the classroom or family child care home or within sight and sound of the child care provider. It will involve the research assistant asking the child some simple questions such as counting two fingers or to pick up a toy or to do simple tasks such as identifying objects (e.g., bottle) or pictures of objects (e.g., dog).

Before or after the child care quality observation is completed, you will be contacted by a Purdue research assistant and asked to complete a survey questionnaire. This survey includes questions that ask about your experiences with the PTQ system. This survey should take you about 15 to 20 minutes to complete, and you may ask for assistance when the Purdue research assistant comes to your center or family child care home. You will be given an opportunity to ask questions regarding this evaluation research.

Finally, you will be contacted by phone by a Purdue research assistant again 6 months following first survey and visit. You will be asked similar questions about your understanding of the PTQ system. You will be given an opportunity to ask questions about the evaluation. All of the information gathered in these surveys and observations will be released to and kept confidential by Purdue University.

Duration of Participation

The duration of the participation of your center or family child care home will be approximately 4-5 hours, which includes having the Purdue research assistant observe your classroom or family child care home, administer two (in family child care homes) to four (in child care centers) child development assessments, and for you to complete the survey questionnaire. The observation of child care quality and the administration of child assessment will take approximately 4 hours.

Benefits to the Individual

There are no direct benefits to you or your center or family child care home. Your participation in this study may help Indiana understand the effectiveness of the PTQ system and may help find ways to improve the overall quality of child care in Indiana and in your community

Compensation

Your center or family child	care home will receive	cash or a certificate worth \$25 for participating	in this evaluation research.
You will be asked to compl	ete and sign the Particip	oant Payment Disclosure Form upon the receipt	of the payment. You will
not be compensated for part	ticipating in the telepho	ne interview six months after the visit.	
			
Participant's initials	Date	Researcher's initials	Date

Risks to the Individual

The risks to participating in this research study are minimal and are no more than you or the children would encounter in everyday life. There is small risk that you will be uncomfortable with the questionnaire or telephone interview questions. However, if at any time you are uncomfortable with any of the questions, you can either decline to answer a question or withdraw from the research without any coercion from the research assistant or Purdue staff. In addition, if the research

assistant believes that children are being abused or neglected while in the classroom, she is required to report such incidences to the proper authorities as mandated by Indiana law.

Confidentiality

All information collected in this research will be kept confidential. Only the Purdue research team will have access to the information gathered in your child care facility, and all identifying information will be removed so that participants cannot be identified. Interviews will not be tape-recorded. Detailed notes will be taken in the interviews and individual providers will be assigned number codes so that identifying information is removed from their interviews. The Principal Investigator will maintain all files identifying individual centers or family child care homes. These files will be stored in a locked filing cabinet in his office and will be maintained for a period of 3 years. The project's research records may be inspected by the Purdue University Institutional Review Board or its designees and by the funding source (e.g., the Child Care Bureau of the Indiana Family and Social Services Administration) to ensure that participants' rights are being protected.

Voluntary Nature of Participation

You do not have to participate in this research project. If you agree to participate you may withdraw your participation at any time without penalty.

Human Subject Statement:

If you have any questions about this research project, you can contact Dr. Jim Elicker, 765-494-2938. If you have concerns about the treatment of research participants, you can contact the Committee on the Use of Human Research Subjects at Purdue University, 610 Purdue Mall, Hovde Hall Room 307, West Lafayette, IN 47907-2040. The phone number for the Committee's secretary is (765) 494-5942. The email address is irb@purdue.edu.

PROJECT AND AM PREPARED TO PARTICIPATE IN THIS PROJECT.				
Participant's Signature	Date			
Participant's Name	Name of Child Care Program			
Researcher's Signature	Date			

RESEARCH PARTICIPANT CONSENT FORM (Parent/Child)

Evaluation of Indiana Child Care Quality Rating System
Dr. Jim Elicker, Principal Investigator
Purdue University
Child Development and Family Studies

Purpose of Research

The purpose of this research is to evaluate the effectiveness of the statewide voluntary child care quality rating system Paths to QUALITY (PTQ), implemented by the Child Care Bureau of the Indiana Family and Social Services Administration. Your child care provider has volunteered to participate in Paths to QUALITY and to be a part of this evaluation research by Purdue University.

Specific Procedures to be Used

As a participant in the research study, your child's classroom or child care will be observed for a period of about 4 hours by a Purdue research assistant for a confidential child care quality assessment.

If you agree to participate by returning the signed consent form to a Purdue research team, your child may be selected to receive a child development assessment.

During the child care quality observation, two children in each classroom or home whose parents have returned consent forms like this one will be selected, and they will receive a child development assessment administered by the trained Purdue research assistant. These data will be released to and kept confidential by the Purdue University Evaluation Research Team. This child development assessment will be done in your child's classroom or within sight and sound of your child's child care provider. The assessment will be done one-on-one with your child, when she/he feels comfortable with the research assistant. It will involve the research assistant asking your child some simple questions such as counting two fingers or to pick up a toy or to do simple tasks such as identifying objects (e.g., bottle) or pictures of objects (e.g., dog).

Shortly before or after the Purdue research assistant visits your child care program and works with your child, you will receive a call to do a phone survey with another Purdue research assistant. This phone interview will take about 15 minutes, and you will be asked about your experience and views of the Paths to QUALITY program. (You do not have to know anything about the PTQ program to participate!)

Duration of Participation

The duration of your child's participation in this research will be approximately 4 hours. Most of the time this will involve the research assistant observing normal activities going in your child's classroom or child care home. During much of this time your child will not be required to do anything except what he/she normally does in child care. This general observation of child care quality takes approximately 3 hours. The child development assessment, when the research assistant is working one-on-one with your child, will take less than 30 minutes.

Benefits to the Individual

There are no direct benefits to you or your child of participating in this research. Your participation and your child's participation in this study may help Indiana understand the effectiveness of the PTQ system and may help find ways to improve the overall quality of child care in Indiana and in your community.

\sim		
Com	nensa	tion

Your family will receive \$10 f	or participating in the stu	dy, upon completion of the child care visit an	nd the parent interview.
Parent/Guardian's initials	Date	Researcher's initials	 Date
Parent/Guardian's initials	 Date		

Risks to the Individual

The risks to participating in this research study are minimal and are no more than your child would encounter in everyday life. There is a small risk that your child will be uncomfortable with the child development assessment. If at any time your child appears uncomfortable or expresses that he or she wants to stop, the research assistant will discontinue the assessment and return your child immediately to her/his child care provider. If observations or assessments are perceived to be disruptive to the child, the observation or assessment will be suspended. If the research assistant observes evidence that children have been or are being abused or neglected, she is required to report such evidence to the proper authorities as mandated by Indiana law.

Confidentiality

All information collected in this research will be kept confidential. Only the Purdue research team will have access to the information gathered, and all identifying information will be removed so that participants cannot be identified. The Principal Investigator will maintain all files identifying individual programs. These files will be stored in a locked filing cabinet in his office and will be maintained for a period of 3 years. The project's research records may be inspected by the Purdue University Institutional Review Board or its designees and by the funding source (e.g., the Child Care Bureau of the Indiana Family and Social Services Administration) to ensure that participants' rights are being protected.

Voluntary Nature of Participation

You and your child do not have to participate in this research project. Even when you give consent to participate and for your child to participate, you or your child may withdraw from participation at any time without penalty.

Human Subject Statement:

If you have any questions about this research project, you can contact Dr. Jim Elicker, 765-494-2938. If you have concerns about the treatment of research participants, you can contact the Committee on the Use of Human Research Subjects at Purdue University, 610 Purdue Mall, Hovde Hall Room 307, West Lafayette, IN 47907-2040. The phone number for the Committee's secretary is (765) 494-5942. The email address is <u>irb@purdue.edu</u>.

I HAVE HAD THE OPPORTUNITY TO READ THIS CONSENT FORM, ASK QUESTIONS ABOUT THE RESEARCH PROJECT AND I AGREE TO PARTICIPATE MYSELF, AND I GIVE PERMISSION FOR MY CHILD TO PARTICIPATE IN THIS PROJECT.

Parent/Guardian's Signature	Date
Parent/Guardian's Name (print)	Name of Child Care Program
Parent/Guardian's Signature	Date
Parent/Guardian's Name (print)	
My child's full name	My child's age (Years & Months)
Researcher's Signature	

PLEASE RETURN THIS CONSENT FORM TO THE MARKED ENVELOPE AT YOUR CHILD'S CHILD CARE CENTER OR HOME. THANK YOU!

RESEARCH PARTICIPANT CONSENT FORM (Teachers/Caregivers)

Evaluation of Indiana Child Care Quality Rating System
Dr. Jim Elicker, Principal Investigator
Purdue University
Child Development and Family Studies

Purpose of Research

The purpose of this research is to evaluate the effectiveness of a statewide voluntary child care quality rating system (PTQ), Paths to QUALITY (PTQ), implemented by the Child Care Bureau of the Indiana Family and Social Services Administration.

Specific Procedures to be Used

Researchers will randomly select a child care provider from providers enrolled in the PTQ system. Once you agree to participate, a Purdue research assistant will schedule a visit in two of the classrooms in your center or in your child care home and then come to observe for about 4 hours for a confidential quality assessment. This is to evaluate the Paths to QUALITY rating assessment. During the child care quality observation, two children in your classroom or home whose parents have returned consent forms will receive a child development assessment administered by the trained Purdue research assistant. These data will be released to and kept confidential by the Purdue University Evaluation Research Team. This child development assessment will be done in your classroom or within sight and sound of you or the director or family child care owner. It will involve the research assistant asking the child some simple questions or to do simple tasks.

Before or after the child care quality observation is completed, you will be contacted by a Purdue research assistant and asked to fill out a short survey form about your education and training, and answer some questions about the two selected children's development. All of the information collected will be kept in secure storage by the research team from Purdue University.

Duration of Participation

The duration of your participation will be approximately 4 hours, which includes having a research assistant from Purdue observe your classroom or child care home and completing the survey about the 2 children's development. The observation of child care quality will take approximately 4 hours. Completing the survey will take about 15 minutes per child (for a total of 30 minutes).

Benefits to the Individual

There are no direct benefits to you or your center or child care home. Your participation in this study may help Indiana understand the effectiveness of the PTQ system and may help find ways to improve the overall quality of child care in Indiana and in your community.

Compensation

Your center or child care home will receive cash or a certificate worth \$25 for participating in this evaluation research.

Risks to the Individual

The risks to participating in this research study are minimal and are no more than you would encounter in everyday life. If the research assistant believes that children are being abused or neglected while in the classroom or child care home, she is required to report such incidences to the proper authorities as mandated by Indiana law.

Participant's initials	Date	Researcher's initials	Date

Confidentiality

All information collected in this research will be kept completely confidential. Only the Purdue research team will have access to the data gathered, and all identifying information will be removed so that participants cannot be identified. The Principal Investigator will maintain all files identifying individual programs. These files will be stored in a locked filing cabinet in his office and will be maintained for a period of 3 years. The project's research records may be inspected by the Purdue University Institutional Review Board or its designees and by the funding source (e.g., the Child Care Bureau of the Indiana Family and Social Services Administration) to ensure that participants' rights are being protected.

Voluntary Nature of Participation

You do not have to participate in this research project. If you agree to participate you may withdraw your participation at any time without penalty.

Human Subject Statement:

If you have any questions about this research project, you can contact Dr. Jim Elicker, 765-494-2938. If you have concerns about the treatment of research participants, you can contact the Committee on the Use of Human Research Subjects at Purdue University, 610 Purdue Mall, Hovde Hall Room 307, West Lafayette, IN 47907-2040. The phone number for the Committee's secretary is (765) 494-5942. The email address is irb@purdue.edu.

I HAVE HAD THE OPPORTUNITY TO READ THIS CONSENT FORM, ASK QUESTIONS ABOUT THE RESEARCH PROJECT AND AM PREPARED TO PARTICIPATE IN THIS PROJECT.

Participant's Signature

Participant's Name

Name of Child Care Program

Researcher's Signature

Date

APPENDIX B Letters to Participants



Invitation to Participate in Research (Director or Child Care Home Owner)

Dear Director (or Child Care Home Owner),

Your child care program has been selected to participate in the Purdue University evaluation of Paths to QUALITY, the state child care quality rating system. The purpose of this research is to evaluate the effectiveness of the Paths to QUALITY system, not to evaluate your program.

The evaluation process includes onsite visit(s) to your child care program (one visit if you are a family child care home owner or two visits if you are a child care center director). During the visit(s), we will ask you to answer some questions about your experience with the Paths to QUALITY program. We will also be observing and assessing some of the children in the program. During the visit(s), we will make every effort to limit interruption to your child care business. We expect each visit to last about 4 hours. This is an announced visit. This is *not* a rating visit. Your child care program will receive a \$25 gift certificate for your participation.

The enclosed consent forms provide additional information about your participation. One is for you to complete and return to us during our visit to your program and one is a copy for your reference. We will call you soon to make arrangements for you to take part in this evaluation. If you have questions, send email to Joellen Guenin at ptq@purdue.edu or phone her at 1-866-807-0810.

Thank you for participation in this important research!

Sincerely yours,

Jim Elicker, Ph.D., Associate Professor Child Development & Family Studies Purdue University





Invitation to Participate in Research (Parents)

Dear Parents,

We are inviting you and your child to participate in the Purdue University evaluation of Paths to QUALITY, the new Indiana child care quality rating system. The purpose of this research is to evaluate the effectiveness of the Paths to QUALITY program, not to provide an evaluation your child or your child care provider.

We hope you help us evaluate Paths to QUALITY by answering questions in a phone interview. We would also like to observe your child and check on some of her/his developmental skills at his/her child care. Two families in your child's class or family child care home will be randomly chosen to participate. If you and your child are chosen, you will receive a \$10 gift certificate for your participation.

The enclosed consent form provides additional information about your participation. If you are willing to participate, please fill out and sign the attached contact information and consent form and return them to the envelope at your child care provider's home or center. We have enclosed a copy of the consent for your reference. If you have any questions, email Joellen Guenin at ptq@purdue.edu or phone her at 1-866-807-0810.

Thank you for considering participation in this important research!

Sincerely,

Dr. Jim Elicker, Ph.D., Associate Professor Child Development & Family Studies Purdue University





Purdue University Paths To QUALITY Evaluation

Parent Contact Information

Please fill this out and return with the consent form in the envelope at your child care center or child care home.

Child Name:		Gender: □ Boy □ Gir
Parent Name:	Email:	
Phone Number 1	Phone Number	er 2
Preferred Time for us to call you:		
Please Check Your Preferred Time for the	e 15 minute Parent	Phone Interview (all that apply)
□Weekday → □ Morning □ Aft	ernoon 🏻 Evening	or o
• □Weekend → □ Morning □ Aft	ernoon 🗆 Evening	
Comments:		
Has your child been diagnosed as having a	a disability?	□ Yes □ No
Do you speak English well enough to do a	a phone interview?	? □ Yes □ No
Does your child speak English?		□ Yes □ No
Thank you very much for consideration.		

(You and your child may or may not be randomly selected to participate!)



Invitation to Participate in Research (Teacher or Caregiver)

Dear Teacher or Caregiver,

We are inviting you to participate in the Purdue University evaluation of Paths to QUALITY, the state child care quality rating system. The purpose of this research is to evaluate the effectiveness of Paths to QUALITY, not to evaluate you, your child care program, or your children. Your center or family child care home has agreed to participate in this evaluation.

We will visit your classroom/family child care home and observe normal, everyday activities. We will also be selecting two children in your classroom whose parents have given permission to be assessed. During the visit, we will make every effort to limit interruption to the care of the children in your classroom or family child care home. We expect the visit to last about 4 hours. This is an announced visit that we will schedule with you and your director/family child care owner. We hope you will help us by completing a brief questionnaire about the two selected children's development and also answer some questions about your education and training.

If you are willing to participate, please fill out and return the enclosed consent form to the Purdue research assistant when she visits the center. There is also a copy of the consent form for you to keep. If you have questions, email to Joellen Guenin at ptq@purdue.edu or phone her at 1-866-807-0810.

Thank you for considering participation in this important research!

Sincerely,

Jim Elicker, Ph.D., Associate Professor Child Development & Family Studies Purdue University



APPENDIX C Classroom Teacher/Lead Caregiver Survey

Classroom Teacher/Lead Caregiver Survey

1. What is the <u>highest</u>	e level of education you have completed so far? (Check only one:)
	Less than high school diploma
	High school diploma (or GED)
	Some college credits, but no degree
	Child Development Associate Credential
	Associate degree (2 yr.) (Major:)
	Bachelor degree (4 yr.) (Major:)
	Masters degree (Major:)
	Doctorate degree (Major:)
2. Do you belong to a	iny early childhood professional organizations? (Check each organization, if you are a member:)
	☐ IAEYC (Indiana Association for the Education of Young Children
	☐ NAEYC (National Association for the Education of Young Children
	ACEI (Association for Childhood Education International)
	NAFCC (National Association for Family Child Care)
	CEC (Council for Exceptional Children)
	☐ My local Community Child Care Provider Organization or Network
	Any other Professional Organization (Name of organization:)
3. How many early ch	nildhood conferences (one day or more) have you attended in the past two years? (Check only one:)
	None
	1
	2
	3
	4
	More than 4
	w many total training hours have you completed during the past 12 months? (total contact hours in ops, conferences, classes, etc.) (Check only one:)
	None
	Less than 12 hours
	12 to 23 hours
	24 to 50 hours
	51 to 75 hours
	More than 75 hours

APPENDIX D Parent Contact Information



Purdue University Paths To QUALITY Evaluation

Parent Contact Information

<u>Please fill this out and return with the consent form in the envelope at your child care center or child care home.</u>

☐ Yes! My child and I will participate in this study.	
Child Name: Date of Bir	th: Gender: □ Boy □ Girl Month/year
Parent Name: En	nail:
Phone Number 1Phone N	Number 2
Preferred Time for us to call you:	
Please Check Your Preferred Time for the 15 minute	Parent Phone Interview (all that apply)
• □Weekday → □ Morning □ Afternoon □ E	vening
• □Weekend → □ Morning □ Afternoon □ E	vening
Comments:	
Has your child been diagnosed as having a disability?	□ Yes □ No
Do you speak English well enough to do a phone inter	rview? 🗆 Yes 🗆 No
Does your child speak English?	□ Yes □ No
Thank you very much for consideration.	
(You and your child may or may not be randomly sele	ected to participate!)

APPENDIX E Initial Survey with Child Care Providers

PTQ Evaluation Methods	40
<u>ID #:</u>	
<u>Initi</u>	al survey with child care providers
answers to this questionnaire will be the Purdue research team. Please be	ersity evaluate the Paths to QUALITY program. All of your completely confidential—not shared with anyone except those on as complete and as honest as you can with your answers to this d effort in sharing your experience with Paths to QUALITY!
quality rating system? (For those	you first enrolled in Paths to QUALITY, the new state child care e in the Evansville or Fort Wayne areas, this is <u>not</u> the original local program run out of Indianapolis.)
Month Date	Year
2. Since you first enrolled in Paths t QUALITY rating?	to QUALITY, has someone come out to visit and give you a Paths to
□ YES	
□ NO	
3. If YES, what was the approximate	te date you received this rating?
Month Date	Year
4. What is your <u>current</u> Paths to Qua	ulity level? (check only one)

5. If your PTQ level has changed since you were first rated, what was the approximate date of your

Year

 \Box 1

 \square 2

 \square 3

□ 4

Month

most recent rating?

Date

0.	At what level do you expect to be when you have your <u>next</u> yearly Paths to QUALITY assessmen visit? (check only one)
	\square 2
	\square 3
	\Box 4
7.]	How did you learn about Paths to QUALITY? (check ALL that apply)
	☐ From my local child care resource and referral (CCR&R) agency Name of my CCR&R program:
	☐ From my child care licensing consultant
	☐ From my child care food program (CCFP) sponsor
	☐ From another child care provider
	☐ Radio advertisement
	☐ TV advertisement
	☐ From a parent of one of my child care children.
	☐ Other. Please specify:
8.	Why did you decide to join the Paths to QUALITY program? (check ALL that apply):
	☐ The gifts and cash incentives that were offered for PTQ participation.
	☐ I wanted to improve the quality of my child care program.
	☐ I wanted new ideas for my child care program.
	☐ I wanted the training or technical assistance that Paths to QUALITY offered.
	☐ I wanted to make my child care more attractive to parents.
	☐ I wanted to increase my business.
	☐ I wanted more professional recognition.
	☐ Other. Please specify:

PTQ Evaluation Methods	42
9. Have you read the Paths to QUALITY levels and standards? (check only one!)	
☐ No, I have not read Paths to QUALITY levels and standards for my type of care.	

Yes, I have read some but not all of the Paths to QUALITY levels and standards for my type
of care.

 $\hfill\square$ Yes, I have read ALL of the Paths to QUALITY levels and standards for my type of care.

Rate the following statements from 1-5 (circle one number for each item)

	Strongly	Disagree	Neither	Agree	Strongly
	disagree		agree nor		Agree
			disagree		
10. I understand the Paths to QUALITY levels	1	2	3	4	5
and standards.					
11. I understand the goals of the Paths to	1	2	3	4	5
QUALITY program.					
12. I clearly see the benefits of participating in	1	2	3	4	5
Paths to QUALITY.					
13. I feel that the benefits of participating in	1	2	3	4	5
Paths to QUALITY outweigh the costs.					
14. I have used to Paths to QUALITY standards	1	2	3	4	5
to improve my classroom/ family home.					

14. I have used to Paths to QUALITY standards to improve my classroom/ family home.	1	2	3	4	5	
15. Do you feel your center/home was fairly assess assigned? (check only one!)	sed when	your curr	ent Paths	to QUAL	ITY level	was
□ NO Why or Why not?						
16. Do you feel that your <u>current</u> Paths to QUALIT quality of the child care you provide? ☐ YES	ΓY level r	ating (1, 2	2, 3, or 4)	reflects th	ne <i>true</i> lev	vel of
□ NO Why or Why not?						

Answer the following questions, thinking about the staff or assistant(s) that currently work with you

in your child care facility. Check only one: ☐ I have at least one co-worker or assistant. (Continue with questions below.) ☐ I have no staff or assistants. I work alone in my child care home. (Skip to Question # 20) 17. In what ways have you shared information about Paths to QUALITY with your staff/assistant(s)? Check ALL that apply. ☐ I have NOT shared any information about Paths to QUALITY with my staff/assistant(s). ☐ I have shared the actual written Paths to QUALITY standards for each level with my staff/assistant(s). ☐ I have shared a *summary* (or brief overview) of the Paths to QUALITY standards with my staff/assistant(s). ☐ I have shared brochures about Paths to QUALITY with my staff/assistant(s). ☐ I have shared written information I received from the Bureau of Child Care or my local resource and referral agency about how Paths to QUALITY benefits the *program* with my staff/assistant(s). ☐ I have shared my personal opinions about how Paths to QUALITY benefits the *program* with my staff/assistant(s). ☐ I have shared written information I received from the Bureau of Child Care or my local resource and referral agency about how Paths to QUALITY benefits the children in our care with my staff/assistant(s). ☐ I have shared my personal opinion about how Paths to QUALITY benefits the *children* in our care with my staff/assistant(s). ☐ I have talked with my staff/assistant(s) during a staff meeting about the Paths to QUALITY standards. ☐ I have talked with my staff/assistant(s) individually (not in a formal meeting) about the Paths

☐ I have shared information about Paths to QUALITY with my staff/assistant(s) in *other ways*.

to QUALITY standards

Please specify:

PTQ Evaluation Methods 44 18. Are your staff or assistants aware of the different Paths to QUALITY levels? \square YES \square NO 19. Do your staff or assistants know what is required for your child care center or home to advance to the next Paths to QUALITY level? \square YES \square NO Answer each of the following questions, thinking about the parent(s) of the children you currently care for in your child care facility. 20. In what ways have you shared information about Paths to QUALITY with parent(s)? Check ALL that apply. ☐ I have NOT shared any information about Paths to QUALITY with parent (s). ☐ I have shared the actual written Paths to QUALITY written standards for each level with parent (s). ☐ I have shared a *summary* (or a brief overview) of the Paths to QUALITY standards with parent (s). ☐ I have shared brochures about Paths to QUALITY with parent (s). ☐ I have shared written information that I received from the Bureau of Child Care or my local resource and referral agency about how Paths to QUALITY benefits the *program* with parent (s). ☐ I have shared my personal opinion on how Paths to QUALITY benefits the *program* with parent(s). ☐ I have shared written information I received from the Bureau of Child Care or my local resource and referral agency about how Paths to QUALITY benefits the children in our care with parent(s). ☐ I have shared with parent(s) my personal opinion about how Paths to QUALITY benefits the children. ☐ I have shared a summary of the Paths to QUALITY standards in a newsletter with parent(s). ☐ I have shared information about Paths to QUALITY with parent(s) in other ways. Please specify: 21. Have you received any type of assistance (mentoring, phone or onsite consultation, training, etc.) from your local child care resource and referral agency while you have been enrolled in Paths to

QUALITY?

 \square YES

 \square YES

PTQ Evaluation Methods	4′
33. How do you expect you can overcome that obstacle?	
34. What aspect of Paths to QUALITY has been <u>most</u> beneficial to you? (Check only one!)	
☐ The gifts and cash incentives I get from the program	
☐ The mentoring services I have received from my local child care resource and ref agency	erral
☐ The training provided through the program	
☐ The <u>recognition</u> I get from parents, other providers, or the public that I am provid quality child care	ing high
☐ Paths to QUALITY participation provides me with a marketing tool for my child program	care
☐ Other most beneficial aspect. (Please specify:)	
35. What percentage of the children in your care have their child care paid for by federal/sta subsidies or vouchers (CCDF)?	—— te child care
(Approximate % of children who are paid for by vouchers)	
For REGISTERED MINISTRIES ONLY. If you are not the director of a registered ministry question # 40.	skip to
36. Are you in the process of seeking a child care center license at this time?	
□ YES	
□ NO	
37. Are you <i>considering</i> seeking a child care center license at this time?	

PTQ Evaluat	ion Methods	48
	YES	
	NO	
	opinion, what has been the biggest obstacle you faced in getting PTQ program?	g your voluntary certifications
39. How d	id overcome that obstacle?	-
		-

Please answer a few more questions about yourself and your experience as a child care provider. (Information you share will be kept *completely confidential*!)

40. What is the hi	ghest level of education you have completed so far? (Check only one:)
	Less than high school diploma
	High school diploma (or GED)
	Some college credits, but no degree
	Child Development Associate Credential
	Associate degree (2 yr.) (Major:)
	Bachelor degree (4 yr.) (Major:)
	Masters degree (Major:)
	Doctorate degree (Major:)
41. Do you belong	g to any early childhood professional organizations? (Check each organization, if you
	IAEYC (Indiana Association for the Education of Young Children
	NAEYC (National Association for the Education of Young Children
	ACEI (Association for Childhood Education International)
	NAFCC (National Association for Family Child Care)
	CEC (Council for Exceptional Children)
	My local Community Child Care Provider Organization or Provider Network
	Any other Professional Organization (Name of organization:)
42. How many <i>ea</i> (Check only o	rly childhood conferences (one day or more) have you attended in the past two years? ne :)
	None
	1
	2
	3
	4
	More than 4

 y how many <u>total training hours</u> have <u>you</u> completed during the past 12 months' hours at workshops, conferences, classes, etc.) (Check only one:)
None
Less than 12 hours
12 to 23 hours
24 to 50 hours
51 to 75 hours
More than 75 hours

THANK YOU! for taking the time to share this information with the Purdue University PTQ Evaluation Team. Your views and experiences will be included with many other providers to summarize providers experiences with PTQ. All information you provide to the Purdue Evaluation Team will be held strictly confidential.

Please return your completed questionnaire to the Purdue University Research Assistant who visits your child care center, ministry, or home.

OR return the questionnaire by mail to:

Dr. Jim Elicker Child Development & Family Studies Purdue University 1200 W. State St. West Lafayette, Indiana 47907-2055 765-494-2966 ptq@purdue.edu

APPENDIX F Follow-up Telephone Surveys with the Original Sample of PTQ Providers

Follow-up telephone surveys with the original sample of PTO providers

ID #:			
PTQ Level	l at time of ir	nitial survey:	
1. Is your c 1. YES 2. NO If no, why?	S	gram still participating	g on Paths to QUALITY?
2. What is 3 1. 1 2. 2 3. 3 4. 4	your current I	Paths to Quality level?	·
3. If level h	nas changed si	ince you enrolled in P	TQ, what was the date of the assessment?
Month	Date	Year	
If program	advanced:		w asked the following questions: enge you faced in advancing to the next level?
5. How did	you overcom	ne that challenge?	
0 1 0	-		ns to QUALITY remained the same rather than increase
7. In your o	opinion, what	was the biggest challe	enge you face in advancing to the next level?
8. How do	you plan to o	vercome that challeng	ge?
	has dropped opinion, why		ns to QUALITY changed?
10. What o		ented your child care	program from remaining on its previous Paths to
<i>For all pro</i> 11. What le		xpect to be at during y	our next yearly visit?

1. 1

- 2. 2
- 3.3
- 4.4

12. Have you received assistance from your local child care resource and referral agency in the past 6 months?

- 1. YES
- 2. NO
- 13. If yes, how many contacts (visits or phone consultations) have you had with your local resource and referral agency?
- 14. Thinking about the **past 6 months or since our last interview**, have you used the following resources to help you either progress to the next level or maintaining your current level in the
 - 14a. Mentoring
 - 1. YES
 - 2. NO
 - 14b. Training provided in my child care center or home
 - 1. YES
 - 2. NO
 - 14c. Training session I attended at the local child care resource and referral agency or in my community
 - 1. YES
 - 2. NO
 - 14d. Consulting in person or by phone from the local child care resource and referral agency's Infant/Toddler Specialist
 - 1. YES
 - 2. NO
 - 14. Consulting in person or by phone from the local child care resource and referral agency's Inclusion Specialist
 - 1. YES
 - 2. NO
 - 14f. Local child care conference
 - 1. YES
 - 2. NO
 - 14g. Local Accreditation work group
 - 1. YES
 - 2. NO
 - 14h. Lending Library
 - 1. YES
 - 2. NO
 - 14i. Scholarships for conference
 - 1. YES
 - 2. NO
 - 14j. IAEYC accreditation advisor
 - 1. YES
 - 2. NO
 - 14k. I have used other kinds of resources or assistance
 - 1. YES

2. NO, please specify:

- 15. Have you received assistance from IAEYC in the past 6 months?
 - 1. YES
 - 2. NO
- 16. If yes, how many contacts (visits or phone consultations) have you had with IAEYC in the past 6 months?
- 17. Are there other organizations you have received assistance from in the past 6 months?
 - 1. YES
 - 2. NO

If yes, please specify the organization:

- 18. If yes, how many contacts (visits or phone consultations) have you had with the organization **in the past 6 months**?
- 19 Have parents asked about your PTQ rating in the past 6 months?
 - 1. YES
 - 2. NO
- 20. Have you increased your child care rates in the past 6 months?
 - 1. YES---CONTINUE with QUESTION 21
 - 2. NO—END INTERVIEW
- 21. Did you increase your child care rates in the past 6 months to offset your costs of participating in Paths to QUALITY?
 - 1. YES
 - 2. NO
- 22. Did you increase your child care rates in the past 6 months as part of a standard of living increase, to increase wages for yourself, staff, or assistants.
 - 1. YES
 - 2. NO
- 23. Did you increase your child care rates in the past 6 months because you are a Paths to QUALITY participant, feel you can now charge more for child care.
 - 1. YES
 - 2. NO
- 24. Are there other reasons you increased your child care rates in the past 6 months?
 - 1. YES
 - 2. NO

If yes, tell me why?

That's it. We are done! Thank you very much for talking with me and for giving your views on child care and Paths to QUALITY!

APPENDIX G Telephone Survey with Parents who have Children in PTQ Classrooms/Family Child Care Homes

Telephone Survey with parents who have children in PTQ classrooms/family child care homes

This survey is to be completed by the parent or guardian of (Child's Name), who attends child care with (Provider's Name.)
Hi, my name is and I am a research assistant from Purdue University. Your child's day care provider is participating in Paths to QUALITY, a new Indiana program designed to improve the quality of care and education for young children. To help Purdue evaluate Paths to QUALITY, will you please take about 20 minutes on the phone with me to answer some questions?
All of your answers to these questions will be completely confidential. Your name will not be shared with anyone. Your answers to these questions will not be shared with your child care provider or anyone else.
Please answer each question as honestly and completely as you can. Thank you for taking the time to answer these questions!
(Confirm the child's name, age, and child care provider.) Just to confirm, your child's name is: And she/he is (#) years old? And the name of the center or home he/she attends is?

Additional Introductory Questions

Now we would like to ask you about the average number of hours per week NAME of CHILD is in child care outside of the home.

- 1. About how many hours each week (on average) does NAME OF CHILD OBSERVED attend NAME OF CHILD CARE FACILITY?
- 2. Do you use any other child care or babysitting outside of your home, other than NAME OF CHILD CARE FACILITY for NAME OF CHILD OBSERVED on a regular weekly basis?
 - 1. Yes
 - 2. No.
 - 88. Don't know
 - 99. Refused

IF YES ASK FOLLOWING QUESTIONS:

- 2a. Is the OTHER out of home child care you use for (Child's Name) provided by . . .
- 1. A Licensed Child Care Center
- 2. A Licensed Family Day Care Home
- 3. A church affiliated registered Ministry
- 4. With a relative in her/his home

- 5. With a friend in his/her home
- 6. Early Head Start or Head Start Center
- 7. Other (please specify)
- 88. Don't know
- 99. Refused
- 2b. How many hours a week does NAME OF CHILD OBSERVED attend this NAME OF SECOND CHILD CARE FACILITY?
- 3. Do you receive any help paying for your child care from the government? For example, do you receive child care vouchers or subsidies from the government to help pay for child care?
 - 1. Yes
 - 2. No
 - 88. Don't know
 - 99. Refused

Now we would like to ask you some questions about your NAME of FIRST CHILD CARE PROVIDER.

- 4. Is your child care provider <u>licensed</u> by the State of Indiana?
 - 1. Yes
 - 2. No
 - 88. Don't know
 - 99. Refused

If a parent asks: What does "licensed" mean?

Respond: Centers and homes are required by the state to be licensed, to show they meet basic health and safety needs.

- 5. Is your child care provider <u>accredited</u> by a Professional Organization?
 - 1. Yes
 - 2. No.
 - 88. Don't know
 - 99. Refused

If a parent asks: What does "accredited" mean?

Respond: Accreditation is a voluntary system that certifies child care quality at a higher level than licensing.

- 6. Were you aware that your child care provider is enrolled in the Indiana Paths to Quality program?
 - 1. Yes
 - 2. No—IF NO SKIP TO QUESTION 10
 - 88. Don't know
 - 99. Refused

7. Did your child care provider share <u>verbal</u> information about Paths to Quality with you, such as talking with you individually or with other parents about Paths to QUALITY?

- 1. Yes
- 2. No
- -77. DID NOT ASK
- 88. Don't know
- 99. Refused
- 8. Did your child care provider share written information about Paths to Quality with you?
 - 1. YES
 - 2. NO
 - -77. DID NOT ASK
 - 88. Don't know
 - 99. Refused
- 10. What is the current Paths to QUALITY level that your provider has earned?
 - 1. Level 1
 - 2. Level 2
 - 3. Level 3
 - 4. Level 4
 - 88. Don't know
 - 99. Refused
- 11. What was your main reason for choosing this particular child care provider for your child? Listen carefully and then tell me which of the following things was the one most important factor in your choice of a child care provider for NAME OF CHILD OBSERVED.
 - 1. Cost/affordability
 - 2. Child care provider accepts vouchers
 - 3. Child care is close to home
 - 4. Child care is close to your or spouse's work
 - 5. Flexible hours child care provider is open.
 - 6. Your trust/comfort level with provider
 - 7. Educational activities provided
 - 8. Warmth of child care provider toward my child
 - 9. Keeping your child with his/her brother or sister
 - 10. Amount of experience caring for children of the child care provider
 - 11. Amount of education of the child care provider
 - 12. The overall quality of care the child care center or home provides
 - 13. Paths to QUALITY rating
 - 14. The provider was recommended by friend
 - 15. Church affiliation
 - 16. Other (please specify)
 - 88. Don't know

99. Refused

- 12. What was the <u>second</u> most important reason for choosing your child care provider(s)? (Take out the one already mentioned when you read the list.)
 - 1. Cost/affordability
 - 2. Child care provider accepts vouchers
 - 3. Child care is close to home
 - 4. Child care is close to your or spouse's work
 - 5. Flexible hours child care provider is open.
 - 6. Your trust/comfort level with provider
 - 7. Educational activities provided
 - 8. Warmth of child care provider toward my child
 - 9. Keeping your child with his/her brother or sister
 - 10. Amount of experience caring for children of the child care provider
 - 11. Amount of education of the child care provider
 - 12. The overall quality of care the child care center or home provides
 - 13. Paths to QUALITY rating
 - 14. The provider was recommended by friend
 - 15. Church affiliation
 - 16. Other (please specify)
 - 88. Don't know
 - 99. Refused
- 13. If cost was not an issue for you, if all child care was affordable for you, what would be the most important thing you would look for in child care?
 - 3. Child care is close to home
 - 4. Child care is close to your or spouse's work
 - 5. Flexible hours child care provider is open.
 - 6. Your trust/comfort level with provider
 - 7. Educational activities provided
 - 8. Warmth of child care provider toward my child
 - 9. Keeping your child with his/her brother or sister
 - 10. Amount of experience of the child care provider
 - 11. Amount of education of the child care provider
 - 12. The overall quality of care the child care center or home provides
 - 13. Paths to QUALITY rating
 - 14. Recommended by friend
 - 15. Church affiliation
 - 16. Other (please specify)
 - 88. Don't know
 - 99. Refused

Paths to Quality is a program that some child care providers in your county participate in. There are 4 levels in Paths to Quality (from 1 to 4). Providers with higher level have met requirements for what research tells us is high quality child care.

- 14. Would you be willing to pay more for child care, if the provider had a higher level of Path to Quality?
 - 1. Yes
 - 2. No
 - 3. Maybe
 - 88. Don't know
 - 99. Refused
- 15. In the future, if you choose to put your child in a different child care, and the provider is in Paths to QUALITY, would a higher level (1 4) influence your decision about whether to put your child there?
 - 1. Yes
 - 2. No
 - 88. Don't know
 - 99. Refused
- 16. On a scale of 1 to 5 with 5 being very important and 1 being not at all important, how important would a higher level of Paths to Quality be in your decision in choosing a child care provider?

(READ EACH OPTION BELOW)

- 1. Not at all important
- 2. Not important
- 3. Neither important nor unimportant
- 4. Important
- 5. Very important
- 88. Don't know
- 99. Refused

Finally, I have a few more questions to ask you about yourself. These are completely confidential, and I am asking them just so we can give a general description of all the parents who completed this survey.

- 17. What is your current marital status?
 - 1. Married
 - 2. Not married and living with partner or significant other
 - 3. Single-never married
 - 4. Divorced
 - 5. Separated
 - 6. Widowed
 - 88. Don't know
 - 99. Refused
- 18. What is the highest level of schooling you have <u>completed</u>?

- 1. Less than 9th grade
- 2. 9th to 12th grade (but did not graduate)
- 3. High school diploma or GED
- 4. High school plus some college credits (but no degree)
- 5. Associate degree (2 years)
- 6. Four-year college graduate (bachelors degree)
- 7. Graduate or professional degree (beyond the bachelors degree)
- 88. Don't know
- 99. Refused
- 19. Which one of the following racial or ethnic groups do you most closely identify with?
 - 1. Caucasian or white American
 - 2. African/Black American
 - 3. Native American
 - 4. Hispanic American
 - 5. Asian American/Pacific Islander
 - 6. Bi-racial or multi-racial
 - 7. Other Specify:
 - 88. Don't know
 - 99. Refused
- 20. How would you describe where you currently live? Would you say it is . . .
 - 1. In a large city
 - 2. in a small city or town
 - 3. In the suburbs or outskirts of a large city
 - 4. In a country village
 - 5. A farm or home in the country
 - 6. Other (please specify)
 - 88. Don't know
 - 99. Refused
- 21. Please stop me when I reach the category that best describes your <u>total household income</u> in 2007 from all wages, salary, investments, and interest before taxes. Would you say that it is . . .
 - 1. Less than \$15,000 per year
 - 2. \$15,000 to under \$25,000
 - 3. \$25,000 to under \$35,000
 - 4. \$35,000 to under \$50,000
 - 5. \$50,000 to under \$75,000
 - 6. \$75,000 to under \$100,000
 - 7. More than \$100,000

- 88. Don't know
- 99. Refused

That's it. We are done! Thank you very much for talking with me and for giving your views on child care and Paths to QUALITY! If you have not already received your \$10 thank you gift from the director of NAME OF CHILD CARE FACILITY, please request it from him/her.

APPENDIX H

Telephone Survey with Parents of Children in the General Public

Telephone survey with parents of children in the general public (random sample)

Q: intro1
Hello, my name is I am a research assistant for the Social Research Institute at Purdue University in West Lafayette, Indiana. We are conducting a survey as part of an ongoing study of Paths to Quality, a child care rating system recently launched by the state in your area. Your phone number was selected at random and I will not ask you for your name or any other information that can be used to identify you. You may also refuse to answer any question you wish by just saying so. The survey takes about 10 minutes to complete. Do you have time now to answer some questions? 1. Yes 2. No (ASK IF ANOTHER TIME WOULD BE MORE APPROPRIATE. KEY 2.)
Q:adult
Thank you.
Our survey requires that I speak to adults that are 18 years of age or older. Are you at least 18 years of age?
1. Yes 2. No
Q: Intro2
Is there someone 18 or older at home I can speak to?
1. Yes 2. No
Q: intro3 Hello, my name is I am a research assistant for the Social Research Institute at Purdue University in West Lafayette, Indiana. We are conducting a survey as part of an ongoing study of Paths to Quality, a child care rating system recently launched by the state in your area. Your phone number was selected at random and I will not ask you for your name or any other information that can be used to identify you. You may also refuse to answer any question you wish by just saying so. The survey takes about 10 minutes to complete. Do you have time now to answer some questions?

2. No (ASK IF ANOTHER TIME WOULD BE MORE APPROPRIATE. KEY 2.)

Q: Six

Thank you for taking time to answer our questions! Here is the first one . . .

Currently, do you have children in your household under the age of six that have been taken care of by other people while their parents are at work?

- 1. Yes
- 2. No
- 8. Don't know
- 9. Refused

Q: county

In which counties do you reside?

- 1=Allen
- 2=De Kalb
- 3=La Grange
- 4=Noble
- 5=Steuben
- 6=Whitley
- 7=Daviess
- 8=Dubois
- 9=Gibson
- 10=Knox
- 11=Martin
- 12=Perry
- 13=Pike
- 14=Posey
- 15=Spencer
- 16=Vanderburg
- 17=Warrick
- 18=Don't know

Q:age1

How old is the first child under age six receiving this care?

Q: hours1

Now we would like to ask you about the average number of hours per week your children are in child care outside of the home, starting with your first child.

For this child under age six, how many hours?

Q:care1a

For this child, is the out of home child care provided by . . . (READ ENTIRE LIST)

- 1. A Licensed Child Care Center
- 2. A Licensed Family Day Care Home
- 3. A church affiliated registered Ministry
- 4. With a relative in their home
- 5. With a friend in their home
- 6. Early Head Start or Head Start Center
- 7. Other (please specify)
- 8. Don't know
- 9. Refused

Q: child2

Do you have a second child under age six receiving child care outside of the home?

- 1. Yes
- 2. No.
- 8. Don't know
- 9. Refused

Q:age2

How old is the second child?

Q: hours2

For your second child, how many hours?

Q:care1b

For this child, is the out of home child care provided by . . . (READ ENTIRE LIST IF NECESSARY)

- 1. A Licensed Child Care Center
- 2. A Licensed Family Day Care Home
- 3. A church affiliated registered Ministry
- 4. With a relative in their home
- 5. With a friend in their home
- 6. Early Head Start or Head Start Center
- 7. Other (please specify)
- 8. Don't know
- 9. Refused

Q: child2a

Do you have a third child under age six receiving child care outside of the home?

- 1. Yes
- 2. No
- 8. Don't know
- 9. Refused

Q:age3

How old is the third child?

Q: hours3

For your third child, how many hours?

Q:care1c

For this child, is the out of home child care provided by . . . (READ ENTIRE LIST IF NECESSARY)

- 1. A Licensed Child Care Center
- 2. A Licensed Family Day Care Home
- 3. A church affiliated registered Ministry
- 4. With a relative in their home
- 5. With a friend in their home
- 6. Early Head Start or Head Start Center

- 7. Other (please specify)
- 8. Don't know
- 9. Refused

Q: payhelp

Do you receive any help paying for your child care from the government? For example, do you received child care vouchers or subsidies from the government to help pay for child care?

- 1. Yes
- 2. No
- 8. Don't know
- 9. Refused

Q: reason1

Now we would like to get your thoughts on how you chose your child care provider(s). For each of the following items, please tell us how important each item was in choosing your childcare provider by indicating whether it is very important, important, neither important nor unimportant, unimportant, or not at all important.

Here's the first one . . .

Cost.

- 1. Very important
- 2. Important
- 3. Neither important nor unimportant
- 4. Unimportant
- 5. Not at all important
- 8. Don't know
- 9. Decline to answer

Q: reason2

Child care provider accepts vouchers.

- 1. Very important
- 2. Important
- 3. Neither important nor unimportant

- 4. Unimportant
- 5. Not at all important
- 8. Don't know
- 9. Decline to answer

Q: reason3

Child care provider is close to home.

- 1. Very important
- 2. Important
- 3. Neither important nor unimportant
- 4. Unimportant
- 5. Not at all important
- 8. Don't know
- 9. Decline to answer

Q: reason4

Child care provider is close to your work.

- 1. Very important
- 2. Important
- 3. Neither important nor unimportant
- 4. Unimportant
- 5. Not at all important
- 8. Don't know
- 9. Decline to answer

Q: reason5

Child care provider is close to my spouse's/partner's work.

- 1. Very important
- 2. Important
- 3. Neither important nor unimportant
- 4. Unimportant
- 5. Not at all important
- 6. Not married nor partnered
- 8. Don't know
- 9. Decline to answer

Q: reason6

Child care provider has flexible hours that they're open.

- 1. Very important
- 2. Important
- 3. Neither important nor unimportant
- 4. Unimportant
- 5. Not at all important
- 8. Don't know
- 9. Decline to answer

Q: reason7

My level of trust with the child care provider.

- 1. Very important
- 2. Important
- 3. Neither important nor unimportant
- 4. Unimportant
- 5. Not at all important
- 8. Don't know
- 9. Decline to answer

Q: reason8

My level of comfort with the child care provider.

- 1. Very important
- 2. Important
- 3. Neither important nor unimportant
- 4. Unimportant
- 5. Not at all important
- 8. Don't know
- 9. Decline to answer

Q: reason9

Educational activities provided by the child care provider.

- 1. Very important
- 2. Important
- 3. Neither important nor unimportant

- 4. Unimportant
- 5. Not at all important
- 8. Don't know
- 9. Decline to answer

Q: reason10

Warmth of the child care provider toward my child.

- 1. Very important
- 2. Important
- 3. Neither important nor unimportant
- 4. Unimportant
- 5. Not at all important
- 8. Don't know
- 9. Decline to answer

Q: reason11

Keeping my child with a sibling.

- 1. Very important
- 2. Important
- 3. Neither important nor unimportant
- 4. Unimportant
- 5. Not at all important
- 8. Don't know
- 9. Decline to answer

Q: reason12

The experience level of the child care provider in caring for children.

- 1. Very important
- 2. Important
- 3. Neither important nor unimportant
- 4. Unimportant
- 5. Not at all important
- 8. Don't know
- 9. Decline to answer

Q: reason13

The amount of education of the child care provider.

- 1. Very important
- 2. Important
- 3. Neither important nor unimportant
- 4. Unimportant
- 5. Not at all important
- 8. Don't know
- 9. Decline to answer

Q: reason14

The overall quality of care provided by the child care center or home.

- 1. Very important
- 2. Important
- 3. Neither important nor unimportant
- 4. Unimportant
- 5. Not at all important
- 8. Don't know
- 9. Decline to answer

Q: reason15

The child care providers Paths to Quality rating.

- 1. Very important
- 2. Important
- 3. Neither important nor unimportant
- 4. Unimportant
- 5. Not at all important
- 8. Don't know
- 9. Decline to answer

Q: reason16

The provider was recommended by a friend.

- 1. Very important
- 2. Important
- 3. Neither important nor unimportant
- 4. Unimportant
- 5. Not at all important
- 8. Don't know
- 9. Decline to answer

Q: reason17

The provider was recommended by a family member.

- 1. Very important
- 2. Important
- 3. Neither important nor unimportant
- 4. Unimportant
- 5. Not at all important
- 8. Don't know
- 9. Decline to answer

Q: reason18

The church affiliation of the child care provider.

- 1. Very important
- 2. Important
- 3. Neither important nor unimportant
- 4. Unimportant
- 5. Not at all important
- 8. Don't know
- 9. Decline to answer

Q: reason19

Were there other reasons involved in the decision?

- 1. Yes
- 2. No
- 8. Don't know
- 9. Decline to answer

Q: reason20

What were the other reasons?

Q:license

Is your child care provider licensed by the state of Indiana?

- 1. Yes
- 2. No

- 8. Don't know
- 9. Refused

Q:accred

Is your child care provider accredited by a Professional Organization?

- 1. Yes
- 2. No
- 8. Don't know
- 9. Refused

Q:paths

Is your child care provider enrolled in the Indiana Paths to Quality program?

- 1. Yes
- 2. No
- 8. Don't know
- 9. Refused

Q:paths1

Did your child care provider share information with you verbally about Paths to Quality, such as talking with you individually or with other parents about Paths to Quality?

- 1. Yes
- 2. No
- 8. Don't know
- 9. Refused

Q:paths2

Did your child care provider share written information about Paths to Quality with you?

- 1. Yes
- 2. No
- 8. Don't know
- 9. Refused

Q:paths3

There are four quality levels in Paths to Quality. Are you aware of the child care provider's current Paths to QUALITY level?

- 1. Yes
- 2. No
- 8. Don't know
- 9. Refused

Q:paths4

What is the current Paths to QUALITY level that Your provider has earned?

- 1. Level 1
- 2. Level 2
- 3. Level 3
- 4. Level 4
- 8. Don't know
- 9. Refused

Q:qual

Paths to Quality is a program that some child care providers in your county participate in. There are 4 levels in the Paths to Quality. Providers with higher level have met requirements consistent with what research tells is high quality child care. On a scale of 1 to 5, with 5 being very important and 1 being not at all important, how important would a higher level of Paths to Quality be in your decision in choosing a child care provider?

- 1. Not at all important
- 2. Not Important
- 3. Neither important nor unimportant
- 4. Important
- 5. Very Important
- 8. Don't know
- 9. Decline to answer

Q:qual1

Would you be willing to pay more for child care, if The provider had a higher level of Path to Quality?

- 1. Yes
- 2. No
- 8. Don't know
- 9. Refused

Q: qual2

In the future, if you choose to put your child in a different child care than the one you use now, and the provider is in Paths to Quality, would a Paths to Quality higher level (1 to 4) influence your decision about whether to put your child there?

- 1. Yes
- 2. No
- 8. Don't know
- 9. Refused

Q:qual3

On a scale of 1 to 5 with 5 being very important and 1 being not at all important, how important would a higher level of Paths to Quality be in choosing a child care provider in the future?

- 1. Not at all important
- 2. Not Important
- 3. Neither important nor unimportant
- 4. Important
- 5. Very Important
- 8. Don't know
- 9. Decline to answer

Q: demog1

Finally, I have a few more questions to ask you about yourself. These are completely confidential, and I am asking them just so we can give a general description of all the parents who completed this survey.

What is your current marital status?

- 1. Married
- 2. Not married and living with partner/significant other
- 3. Single-never married
- 4. Divorced
- 5. Separated
- 6. Widowed
- 8. Don't know
- 9. Refused

Q: educ

What is the highest level of schooling you have completed?

- 1. Less than 9th grade
- 2. 9th to 12th grade (did not graduate)
- 3. High school diploma or GED
- 4. High school plus some college (no degree)
- 5. Associate's degree (2 years)
- 6. Four-year college graduate (bachelor's degree)
- 7. Graduate or professional degree (beyond the bachelor's degree)
- 8. Don't know
- 9. Refused

Q: race

Which racial or ethnic group do you most closely identify with?

- 1. Caucasian or white American
- 2. African/Black American
- 3. Native American
- 4. Hispanic American
- 5. Asian American/Pacific Islander
- 6. Bi-racial or multi-racial
- 7. Other [BOX OPENS]
- 8. Don't know
- 9. Refused

Q: live

How would you describe where you currently live? Would you say it is . . .

- 1. In a large city
- 2. In a small city or town
- 3. In a suburbs or outskirts of a large city
- 4. In a county village
- 5. A farm or home in the country

- 6. Other (please specify)
- 8. Don't know
- 9. Refused.

Q: income

Please stop me when I reach the category that best describes your total household income from wages, salary, and interests before taxes, in 2007. Would you say that it is . . .

- 1. Less than \$15,000 per year
- 2. \$15,000 to under \$25,000
- 3. \$25,000 to under \$35,000
- 4. \$35,000 to under \$50,000
- 5. \$50,000 to under \$75,000
- 6. \$75,000 to under \$100,000
- 7. More than \$100,000
- 8. Don't know
- 9. Refused

Q: end

That's it. We are done! Thank you very much for talking With me and for giving your views on child care and Paths To Quality.

(PRESS ANY KEY TO GET TO THE DISPOSITION BOX.)

Q: sex

What is the respondent's sex?

- 1. Female
- 2. Male
- 3. not sure

Q:end1

Thank them and hang up. (hit any key)